CITY OF GREAT BEND THREE-MILE RADIUS
CONDITIONAL USE PERMIT APPLICATION
(To be filed a minimum of four weeks prior to the regularly scheduled Planning Commission meeting.)

Date: __________________________________________                    Filing Fee: $150.00

Applicant’s Name: ______________________________________
Applicant’s Address: ______________________________________
Owner’s Name: ______________________________________
Owner’s Address: ______________________________________

Property Address: ______________________________________
Zoning District: __________ Present Use of Property: __________
Proposed Use of Property: ________________________________

** (A conditional use shall only be allowed for the uses that are expressly authorized to be allowed as a conditional use in a particular zoning district.)

Please attach all of the following:

• Filing Fee of $50.00
• Copy of Legal Description as recorded in the Barton County Register of Deeds Office
• Copy of Lease Agreement (if applicable)
• Certified list of all property owners within 1,000 foot radius of all property lines of the tract
• Scaled site plan of the proposed development showing any and all existing and proposed structures or land marks
• A plat showing the property owners surrounding the proposed development and current use of surrounding property. (Property owners shall be notified twenty (20) days prior to the meeting.)

Period of Validity: No conditional use permit granted by the Governing Body shall be valid for a period longer than 180 days from the date on which the Governing Body grants the conditional use, unless within such 180 day period: (1) a building permit is obtained and the erection or alteration of a structure is started, and (2) a use is commenced or continued pursuant to the conditional use.

Planning Commission will forward their recommendations from the regularly scheduled meeting of the City of Great Bend City Council.

__________________________________________
Property Owner’s Signature                     Date                     Applicant’s Signature

----OFFICE USE ONLY----

Application Received By: ________________________ Date: __________ Fee Paid: __________
Planning Commission Action: Approved _________ Rejected __________ Date: __________
Conditions and Restrictions: ________________________________________________________________

__________________________________________
Secretary of Planning Commission: __________________________ Date: __________